Role satisfaction: Grandparents raising grandchildren

Noreen Orman Ayres

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ROLE SATISFACTION: GRANDPARENTS RAISING GRANDCHILDREN

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Noreen Orman Ayres
September 2006
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ABSTRACT

Research indicates that one in ten grandparents are raising their grandchild for six months to three years or more; research also indicates that this trend is on the upswing. Historically, role satisfaction has been relegated to the back burner of social issues; however as this population increases, so does the need to become more familiar with the culture of custodial grandparents.

Utilizing quantitative research methods, focusing on role satisfaction, the reader will have the opportunity to hear the voices of grandparents raising grandchildren regarding their housing, finances, physical and mental health. This study provides a more in depth understanding of the challenges and rewards this select, unique and dedicated segment of the population experience daily as they endeavor to navigate their twilight years.
ACKNOWLEDGMENTS

First to my parents Martha and John Orman who left a legacy that one succeeds when they try, they fail when they don’t even try.

I wish to express my gratitude to Dr. Rosemary McCaslin, Faculty Supervisor. Her guidance, wisdom, and patience are greatly appreciated.
DEDICATION

To Jeniffer and Jef my true life accomplishments, and to Michael Edward who holds his Nana’s heart.
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CHAPTER ONE

INTRODUCTION

Though I can’t go back and make a brand new start I can start from now and make a brand new ending.

(Jim Karas, 2004)

Problem Statement

There has been a 30% increase in grandparent-headed households from 1990 to 2000 (AARP, 2003). While this phenomenon has not reached epidemic proportions, statistics indicate there is a growing trend for grandparents to assume the responsibility of raising their grandchildren. In 1994, statistical reports indicated that 2.1 million children were in homes not shared by either biological parent (Kelley, 1993). Five percent of all school-aged children live with their grandparents (Fuller-Thomson, Minkler, & Driver, 1997).

Prior to this research one might assume that custodial grandparents could be dissatisfied on a personal level with their quality of life but be satisfied taking on the responsibilities of raising their grandchildren. The same might be assumed reversing the scenario. What has come to be accepted historically is that society conveys
the message that it holds a dim view of grandparents who are unwilling to assume the caretaker role of their grandchildren when called on. The situation that has evolved amounts to a self-imposed gag order; grandparents are unwilling to come forward and express what they may be harboring in their hearts.

The problem with grandparents not speaking up is that they lose their voice. When that happens they give up a portion of the power to change those situations and issues that cause custodial grandparent dissatisfaction.

Role satisfaction is an indicator of an issue older adults frequently encounter in late life. The role of custodial grandparent affects the quality of the older adult’s late life plan; just as the arrival of children changes their parent’s life, so does the introduction of grandchildren into the established life-style of the aging grandparent. As people age, there is a tendency to look forward to a time when they can enjoy financial freedom and fewer child rearing responsibilities. The introduction of grandchildren into their lives goes well beyond thoughts of Generativity (Erikson’s, 1963) eight stages of development, stage seven (Zastrow & Kirst-Ashman, 2001, p. 279); it is a 24-7 commitment grandparents assume, and that commitment changes the entire dynamics of the aging
adult's life dramatically. It is important to social work practice that the dynamics of the custodial grandparent family unit are recognized and specifically that those needs expressed as wanting by grandparent do not go unchecked.

Grandparents have a unique opportunity to preserve kinship ties. But one needs to ask at what personal cost? Role satisfaction and self-esteem go hand in hand. Humanitarian and designer of The Human Process Validation Model, Virginia Satir (1916-1988) offers that "the level of a person's self-esteem determines, in large part, the quality of a person's performance, health, and relationships" (Carlson & Kjos, 2002, p. 171). It then can be concluded that a decrease in role satisfaction by grandparents raising their grandchildren has wide spread implications.

This research project examined role satisfaction of grandparents raising grandchildren, in an effort to better meet the needs of an increasing population who historically have been viewed by governing agencies, power brokers, and social service agencies as the "second pair" of parents whose duty it is to assume the custodial parenting role when the biological parent has vacated the role of parent. It is only recently that law and agencies
have formally recognized kin care; Governor Gray Davis signed A.B. 109 into law on August 24, 1999 which focused on employee leave time to tend to family members.

Custodial grandparents are defined as having the primary responsibility for raising a grandchild for six months or more (Fuller-Thomson & Minkler, 2001). Typically, the change in care was precipitated by the existence of severe problems in the child’s nuclear family (Kleiner, Hertzog, & Targ, 1998). Based on 1996 Census data, the ages of 48% of the custodial grandparents are between 50 and 64, with an additional 33% under the age of 50 and 19% over the age of 65 (Kleiner, Hertzog, & Targ, 1998). Grandmothers exclusively maintain forty-six percent of these families (Kleiner, Hertzog, & Targ, 1998), 76% of the female grandparents were married (Casper & Bryson, 1998), and 40% of grandparents raising their grandchildren were male.

Grandparents have traditionally served as safety nets for their grandchildren. Divorce, substance abuse (implicated in over 80% of all cases) [Burnette, 1999], child abuse and/or neglect, increasing rates of teenage pregnancy, death, abandonment, unemployment, incarceration and mental health problems are all contributing factors to the shift of grandparent’s responsibilities.
As a cost-savings measure, agencies are turning to the grandparents as the primary candidate for children who no longer are cared for by their biological parent. In 1996, the Personal Responsibility and Work Opportunity Reconciliation Act mandated states to give preference to adult relatives over non-relatives when determining placement of a child (Burnette, 1997). Grandparents are being sought as the alternative caregiver to the disintegrating family unit of well over two million children. Social work professionals need to follow in the footsteps of social work advocates and pioneers such as Jane Addams by examining the data, being informed and raising the consciousness level of the public in order that the socioeconomic and psychological needs of these emerging households are being met.

**Purpose of the Study**

With more than one in ten grandparents raising a grandchild for at least six months to three years or more (Fuller-Thomson, Minkler, & Driver, 1997), the following three psychosocial dynamics were assessed for their effect on role satisfaction among grandparents raising grandchildren: (1) the impact of expanding a household on a limited fixed income, (2) health issues of the
grandparent as they apply to stamina, and (3) the interaction with their existing social structure to include grandchildren (adjustments, prioritizing, and social isolation).

This project focused on custodial grandparents. By definition, these grandparents have legal custody of their grandchildren; they have the chief responsibility of providing daily care and are directly involved in decision-making tasks. While the term grandparent (single caregivers) will be used throughout this project, it is to be understood that this study includes grandparents (dual caregivers) and the two will be referenced interchangeably unless otherwise specified.

Due to a spectrum of factors, the United States population has extended their life span; with that comes the opportunity for older adults to assume the role of custodial caregivers, and they have a voice. Even though 75% of all older Americans experience being a grandparent (Fuller-Thomson et al., 1997) studies seem to focus on grandparenting in the traditional sense, i.e., grandparents maintaining a separate household from the grandchild. Few have heard the voice of the custodial grandparent or even chose to listen because the cry in the wilderness has not impacted their lives.
Exploratory research helps diagnose the dimensions of a problem; it helps to clarify, it helps define the nature of a problem, and in general makes it more real. Specific to this project, the purpose of an exploratory research study was to examine custodial issues of finances, health, and social structure in an effort to identify areas of effective intervention to increase role satisfaction of grandparents raising grandchildren.

There were several research models worthy of consideration; the two that appeared to best meet the needs of this project were qualitative (interviews) and quantitative (instrument). It was anticipated the combination of these two models would allow the researcher to determine areas of need from a multidimensional perspective, prepare and recommend an intervention to increase role satisfaction of custodial grandparents raising their grandchildren.

In summary, the question being asked was, what factors and risk features contribute to role satisfaction among custodial grandparents raising their grandchildren?

Significance of the Project for Social Work

Older adults faced with the role of custodial grandparents need assistance in putting pressure on
legislators to meet their changing life style needs. It is crucial that agencies such as the Department of Children Services, Department of Aging, Department of Behavioral Health, Family Services Association, Grandparents Alliance Associations, Housing Authorities, and senior centers are not only informed as to the baseline of needs but also the emotional desires of the grandparents in order to maintain a level of environmental well being. In addition, financial aid programs in general need to be uniform from state to state; time limits for receiving aid, work requirements and custody issues need to be examined to insure grandparent role satisfaction. If grandparents are expected to meet the needs of their grandchildren in their care, and to operate within and respond to custodial guidelines then they need to be afforded the same rights and considerations as the biological parent, in and out of the legal system.

There can be no band-aid approach offered to the expanding contingent of grandparents raising grandchildren. There is a whole litany of problems facing both grandparents and their grandchildren that require a long-range approach to problem solving. The history of the nation is one of change, of advancement, of conquering new horizons. Those issues that once were a dim haze on the
horizon are becoming a reality. The precipitating issues that were influential in creating the increased roles of custodial grandparents are becoming the bedrock of new issues yet revealed.

One of the goals of the social work professional is to routinely represent the disenfranchised. It was anticipated that data collected and analyzed from this project will provide information that can be used to promote a partnership of understanding between the custodial grandparent, teachers, physicians and other medical staff.

Research indicates that, for some of the professionals that affect the grandchild’s life, the role of the custodial grandparent is unclear or misunderstood (Goldberg-Glen & Sands, 2000). Role satisfaction of the custodial grandparent increases when who is responsible for this child’s well being is clearly understood. Teachers and physicians are only a few who need to be more informed about the role of custodial grandparent. Custodial grandparents are not interim parents, nor are they the children’s “second set” of care takers; for the most part, their grandchildren will never be returned to their biological parents.
The results of this study will potentially contribute to social work practice, policy, and research by identifying the areas where low role satisfaction is reported. The thrust of intervention is to promote/increase role satisfaction of the custodial grandparent by designing more effective, appropriate social service programs, equalizing opportunities, diminishing inequality, and refining the objectives of federally and state funded programs.
CHAPTER TWO
LITERATURE REVIEW

The role of custodial grandparent transcends all socioeconomic groups, geographic areas and ethnicities. However, custodial grandparents are more apt to be poor and live near or in a city, and have less than a high school education. More such families live in the south (57%) than in all other areas of the United States combined (Rothenberg, 1996). In inner-city African American communities, it is estimated that up to 50% of the children may be in the care of their grandparents (Roe & Minkler, 1998-99). Fifty-one percent of children living with custodial grandparents are younger than age six, twenty-nine percent are between the ages of six and 11, and twenty percent are between the ages of 12 and 17 (Henderson & Stevenson, 2003).

A study conducted by the School of Public Health, University of California, Berkeley, reported that pre-care giving attitudes concerning grandparents raising grandchildren did not significantly increase the likelihood of becoming a custodial caregiver. A significant predictor was being female, African American,
and not having completed high school (Minkler & Fuller-Thomson, 2000).

Certainly, ethnic affiliation is not the main reason grandparents assume the role of custodial grandparent; there are a variety of reasons. Divorce, substance abuse (availability of crack cocaine), child abuse and/or neglect, teenage pregnancy, death, abandonment, unemployment, incarceration and mental health problems are all contributing factors to the shift in care giving responsibilities (Rothenberg, 1996). The Orphan Project of New York City (1995) estimated that by the year 2000, 75,000 to 125,000 children would be orphaned because their mothers had died of HIV/AIDS (Joslin & Harrison, 1998). Whatever the reason for the formation of these new family units, 71% of custodial grandparents believe their roles are permanent, 11% of grandparents believe their role is only temporary and 17% are unsure of the status or duration of their role (Woodworth, 1996).

Another factor contributing to grandparents assuming the parenting role is legislative activity. The amended September 1995 Social Security Act requires states to specify adult relatives as the first foster care option. The Kinship Care Act of 1996 puts grandparents first in line as potential foster care parents and adoptive parents
for grandchildren who, for safety reasons, have been removed from their parents’ home (Rothenberg, 1996).

The following table compares by ethnic affiliation, the percentage of grandchildren receiving custodial care on a national level and identifies groups specific to California. The information was taken from the U.S. Census Bureau Table DP-2 Profile Selected Social Characteristics-2000.

Table 1. Grandchildren Receiving Custodial Care

<table>
<thead>
<tr>
<th></th>
<th>NATIONAL</th>
<th>CALIFORNIA</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>29%</td>
<td>12%</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>17%</td>
<td>42%</td>
</tr>
<tr>
<td>Asian</td>
<td>3%</td>
<td>9%</td>
</tr>
<tr>
<td>American Indian/Alaskan Native</td>
<td>2%</td>
<td>1%</td>
</tr>
<tr>
<td>White</td>
<td>47%</td>
<td>33%</td>
</tr>
</tbody>
</table>

In California there are 625,934 children living in grandparent-headed households (6.8% of all the children in the state) (AARP, 2003).

Nationally, 4.5 million children are living in grandparent-headed households; this represents 6.3% of all children under age 18, a 30% increase from 1990-2000 (AARP, 2003). Nearly 54% of grandparent caregivers have had responsibility for their grandchildren for three or more years (Butts, 2002). Of additional note, 6.3% of
children living with their grandparents do so without the presence of a biological parent in the home. This is known as a split family (Goldberg-Glen & Sands, 2000). Figures may be even higher due to grandparents underreporting their responsibility as custodial caregiver fearing the grandchildren might be taken away from them, or fearing threats made by the biological parents (Woodworth, 1996).

Financial Concerns

Many custodial grandparents are on a fixed income or working minimum wage jobs; there is a 50-50 split between custodial grandparents who are working and those that are not. Forty percent of custodial grandparents have incomes less than $20,000, 41% have incomes from $20,000 to $40,000; and 20% have incomes in excess of $40,000 (Woodworth, 1996). The median income for custodial grandparents in 1997 was $22,176 (Fuller-Thomson, Minkler, & Driver, 1997). Nineteen percent of custodial grandparents’ households live in poverty, compared with 14 percent of all families with children (Armas, 2003). At the same time, these caregivers save taxpayers more than $4.5 billion a year by keeping millions of children out of the foster-care system (Butts, 2002).
Looking through the lens of previous research, it might be concluded that positive role satisfaction is automatically achieved when a grandparent assumes the role of custodial grandparent. However, based on empirical data (Kelley, 1993), many grandparents are not financially prepared to take on the responsibilities of raising their grandchildren; many suffer from economic difficulties. Accompanying the grandchild are unplanned expenses associated with education, medical/dental care, housing, food, social activities, and clothing.

For the most part grandparents are living on fixed incomes. What funds they may have saved for their retirement years can be depleted rapidly by the needs of the additional family members. Just the cost of one child's haircut can determine what is put on the table for the evening meal. Even basic school needs quickly accelerate as the child requests “trendy” clothing, and equipment to participate in a sports program or attend summer camps. Children who have been exposed to drugs, or who have suffered abuse or neglect may suffer from physical and/or emotional problems and may require additional costly attention (Szinovacz et al., 1999).

One of the key issues identified in the 1995 White House Conference on Aging was poverty. Welfare reform such
as the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 shifted responsibility for public assistance to states and emphasized individual responsibility, work requirements, and benefit eligibility limits. However, 85% of Family Assistance cases which include an adult are subject to time limits and other restrictions unless exempted (needed in the home due to illness or incapacity of a household member) [Burnette, 1997].

Research data available for review was easily accessible and up to date. There was, however, evidence of lack of attention to the non-traditional grandparent head-of-household. Research was based on the traditional two-gender households. As the structure of society changes, social work professionals should be mindful that the spectrum of populations needs are met and acknowledged.

Health

In a February 1, 2005 interview with three kinship grandparents, the lack of both physical and cognitive stamina was the main theme. The aging adults felt drained at the end of the day, and when asked, "what do you need the most" they all replied more energy to meet the needs
of raising their grandchildren. Human bodies have been constructed so they will slow down to accommodate old age; the human form at 65 was not created to take on the responsibilities of expending the energy of a 30-year-old parent. The 65 year old grandmother may have had visions of sitting on the couch knitting in her retirement years, not being out playing baseball catch, or standing on her feet baking cupcakes for a school room of 40 students.

Nationally, 36% of custodial grandparents rate their own health as fair, poor, or very poor (Minkler & Fuller-Thomson, 1999). There is evidence that grandparents have a tendency to downplay the severity of their own health problems (Minkler & Roe, 1993). This inattention to their own medical needs may stem in part from lack of medical coverage. In an AARP Women's Initiative Survey, 19% of those responding indicated health insurance as the biggest problem faced by custodial-headed households (Burnette, 1997).

Research available for review targeting custodial grandparents' health was scarce. In particular, little attention has been given to the mental well being of the grandparent as the caregiver. Two reasons come to mind. One, grandparents who want to keep custody of their grandchildren are hesitant to report accurately because
they feel any indication they are in poor health either physically or psychology may jeopardize custody of the child placed in their care. Second, historically focus is on the young; the public just doesn’t want to hear about those old folks problems.

Social Structure

Bowers and Meyers (1999) report grandparents do not usually take over the parenting of a grandchild by choice; rather the grandparents feel that the shifts in parenting responsibilities are a result of last resort. The parental shift is characteristically precipitated by evidence in the biological home of alcohol or drug abuse, mental or emotional problems, neglect or abuse of children, divorce, job loss, incarceration in jail or a mental facility, or death.

By contrast, Minkler and Roe (1993) report the time that a grandparent assumes the role of parent can be a time of renewed sense of purpose. Kleiner, Hertzog, and Targ (1998) echo this sentiment. Becoming a custodial grandparent affords the “chance to raise a child differently, to nurture family relationships, continue family histories and to receive love and companionship from their grandchildren.”
One quarter of custodial grandparents in the United States report significant levels of depression, nearly twice that of non-custodial grandparents (Minkler et al., 1997). Statistics like these indicate that the positive mental health benefits experienced by custodial grandparents may be offset by the daily stressors as the primary caregiver to their grandchildren.

Regarding role satisfaction and change, in addition to the grandparent experiencing financial status and physical change, their social world also changes to accommodate the active child. Custodial grandparents were more likely to have limitations in four of five activities of daily living (ADL's), with more than half reporting some limitation in one of five ADL's, or at the very least a 50% higher chance of having an ADL limitation (Fuller-Thomson, Minkler, & Driver 2000).

To understand how the older adult reacts to disengagement from their actual and perceived environment to the new environment of custodial grandparent, one has to look at the relationship of custodial grandparenting and their sense of loss. To a large degree, grandparents who have unexpectedly assumed the role of parenting their grandchildren report a sense of loss as a perceived loss.
of personal freedoms, loss of their child, and the loss of their peer group (Pinson-Millburn et al., 1996).

The common theme is that people are who they are because of the social environment with which they are identified. Based on literature review, and not survey findings, is it premature to conclude the grandparent who has been disengaged from an age appropriate environment can feel lost and abandoned in time of emotional need? The answer lies in self-reporting. Custodial grandparents run the risk of being adrift; their self-identification is at jeopardy. “Grandparents cannot be “grandparents” to the child who is under their care when they are parenting that child.

Another factor to consider when appraising grandparents role satisfaction is that grandparents may become isolated from friends and family because of the new focus of their lives; in retirement years the new social network generally is rethought to mesh with the demands of raising a child. Peers who do not have the responsibility of care giving may not want to include the custodial grandparent in their social activities.

Concerning emotional health, Gibbons (2003) notes that African American grandparents who found themselves in their new role as custodial grandparents experienced
intense feeling and thoughts, and reported questioning their own role in the dysfunctional behaviors of their adult children (where did we go wrong?). Similar findings are reported by Hayslip, Shore, Henderson, and Lambert (1998). Role satisfaction and relationship quality are "affected negatively by the resumption of the parental role" (p. 165).

Specific to identity role relationships, other grandchildren may resent the fact that the resident grandchild is monopolizing the grandparent’s time and energy. Even the adult child may resent their parents assuming the role of care giver for their sibling’s or for their own children. Awareness on the part of the custodial grandparent of others’ feelings in all probability affects their role satisfaction.

Theories Guiding Conceptualization

Regarding the specifics of grandparent role satisfaction, the following theories are found in Social Gerontology. “Symbolic interactionist perspective of aging is that the combined factors of an individual’s environment greatly impact the quality of the aging process one experiences.” “People derive their self-concepts from interacting with others in their social
milieu (Labeling theory).” “Older people maintain their self-concepts and social identities through their membership in a subculture...through shared backgrounds, problems, and interest (Subculture of Aging theory)” (Hooyman & Kiyak, 2002, pp. 262-263).

There are several theories of psychosocial aging that are useful in analyzing the dynamics of role satisfaction among grandparents raising grandchildren.

A study of grandparent caregivers in Ohio (Landry, 1999) using Role Theory found that “social isolation and lack of role models as well as peer confidants may emerge if one is not able to connect with grandparents raising grandchildren” (p. 381). Because the role of custodial grandparent is not typical, it becomes difficult for them to relate to typical grandparents or “empty nesters” because they are still raising children. Fifty-four percent of the caregivers in the Landry study reported some concern about their own emotional health; 31% indicated that they had felt “blue” within the last four weeks.

In Erikson’s (1963) eight stages of development, stage seven is Generativity versus Stagnation. People reaching this stage of life are concerned with helping or guiding the following generation. “Generativity involves a
genuine concern for the future beyond one's own life track" (Zastrow & Kirst-Ashman, 2001, p. 279); one develops past the stage of being concerned with meeting only the needs of self. The achievement of Generativity staves off self-involvement and personal stagnation (lack of psychological movement or growth). Generativity secures the future of society as a whole as it focuses on the horizon of the future. "It involves having the adult members dedicating themselves to contributing their skills, resources, and creativity to improve the quality of life for the young" (Zastrow & Kirst-Ashman, 2001, p. 428). With the concept of Generativity in mind it is conceivable to theorize that people reaching this stage of maturity acknowledge their responsibility in raising their grandchildren; the concept of Generativity is just one component to the life cycle, and another underlying factor in custodial grandparent role satisfaction.

James and Jongeward (1971) theorize that our society functions according to the dictates of cultural and family scripts. Culturally women are socialized to have a life script of being primarily concerned with marriage and the home. They are socialized to be nurturing, to instinctively love to care for babies and young children, and to be self-sacrificing for their family (Zastrow &
Kirst-Ashman, 2001, pp. 436-437). It may be considered that some groups take their daily life functions from a life script they have come to accept rather than the reality of their circumstances; it would seem, based on research, that custodial grandmothers fit the profile described by James and Jongeward.

Peck (1968) contends there are four psychological issues critical to successful adjustment in middle adulthood. Three of the four apply to grandparents raising grandchild.

1. Valuing wisdom versus valuing physical powers. Well-adjusted adults are aware that the wisdom they have acquired more than compensates for the decreases in stamina. To be an active participant in a child’s life requires a great reservoir of stamina. Rather than feeling remorseful for their fading stamina, the well-adjusted grandparent will use their wisdom as a tool in the child rearing process.

2. Emotional flexibility versus emotional impoverishment. Peck states, “emotional flexibility is the capacity to shift emotional investments from one activity to another, and from one person to another” (Zastrow &
When grandparents take on the responsibility of custodial parent, the entire focus of how they relate to their environment changes, the child and their needs takes center stage. For this dance to move smoothly, the grandparent needs to remain emotionally flexible.

(3) Mental flexibility versus mental rigidity. As people age there is a tendency for some to stop seeking new information and ideas and become set in their ways. Assuming the role of custodial grandparent jettisons the caregiver into a whole new world of experiences and offers many new challenges and learning opportunities (Zastrow & Kirst-Ashman, 2001, p. 428).

The three issues Peck describes on the surface may seem manageable, but in the eleventh hour as the custodial grandparent is faced with yet another crisis or adjustment, one has to consider how these issues impact role satisfaction of the grandparent(s). The mental well being of the custodial grandparent(s) will be greatly enhanced if they are successful in meeting the challenges of each of Pecks psychological development components.
Hooyman and Kiyak, (2002) reference the work of Cottrell (1942). They suggest that the role people play as adults is "associated with a certain age or stage of life" (p. 256). So what happens when an adult who by the standards of society should be enjoying the rewards of their labor is involved in an instant replay of their younger years as head of household raising the young? The authors continue, "age alters not only the roles expected of people, but also the manner in which they are expected to play them" (p. 257). The young parent may be granted some lee way by society when they fall short in their competency in child raising due to lack of experience, but certainly the aging grandparent having already experienced child raising is not given the same consideration by society; they are expected to get it right. This implied pressure to succeed where others have failed introduces increased stress to the new family equation, and must in some measure impact role satisfaction.

Summary

In many ways custodial grandparenting is an invisible component of the current family unit. Society assumes the wayward child will be absorbed into the family unit, but with the population growing older government regulations
have not grown in proportion to the problem. With increased traffic through various social service agencies, it is crucial to examine the inclusive system of care to meet the needs of grandparents raising grandchildren. Out of necessity numerous grass root organizations such as the Kinship Support Program have developed to meet the needs of the grandparent and child. These groups provide the numbers needed for advocacy work, and they are a social outlet for both grandparent and child.
CHAPTER THREE

METHODS

Introduction

The chapter will discuss the study design, sampling, data collection and type of instrument that was used. Also discussed are the procedures by which the data as collected, followed by protection of human subjects and data analysis.

Study Design

There were several research models worthy of consideration; the two that appeared to best meet the needs of this project were qualitative (interviews) and quantitative (instrument). The combination of these two models allowed the study to determine areas of need from a multidimensional perspective.

Qualitative methods (interviews) are used in research to hear the voices of the subjects they are researching. Qualitative research focuses on words, feelings and observations. The data that are collected from the interview process are value laden.

By contrast, quantitative research methods focus on numbers. Quantitative research is used to gather
information from a standardized, objective perspective to determine the extent of some phenomenon.

The two types of data collection methods were offered for reasons of validity and sensitivity. Data collection from a standardized source provides validity to the findings; however, the sensitivity quotient had the potential to be missing. The interview process had the potential to address the sensitivity component; its inclusion in the data gathering process presented an opportunity for the researcher to explore with the survey participants the reasons behind their answers.

None of the respondents chose to be interviewed using the proposed question. It is interesting to note that at the conclusion of completing the questionnaire, and out of earshot of respondents who had not completed the questionnaire several of the respondents sought out the researcher for the opportunity to discuss their role satisfaction as a custodial grandparent. Comments and observations from that portion of the project will be reported in Chapter Five.

Sampling

In terms of data collection, it was determined the data source would be custodial grandparents who were
raising at least one grandchild in their home, under the age of eighteen, in the absence of the biological parents. The length of time in the caregiving relationship did not restrict research participation.

Sampling included a population of 33 custodial grandparents from the time period beginning June 2005 and ending July 2005. Data was collected on a self-constructed survey instrument.

Participants in the study were selected from a Grandparents Raising Grandchildren support group led by Jane Acton in Idyllwild, California. The group was selected because membership was comprised of custodial grandparents.

Both male and female grandparents whose ages were 55 years and older were included in the study. The study was inclusive regarding ethnicity, marital and occupational status. It was hoped that out of the group, data could have been collected from 30-50 participants.

Sampling was conducted by virtue of a desire to participate; the group had been approached and was eager to be a part of this project. It was left up to the discretion of group members if they wished to participate in the qualitative or quantitative survey. A type of snowball sampling was encouraged. It was anticipated that
members from the proposed group had linkage to other grandparents who meet the characteristics as outlined above; referrals were welcomed.

Data Collection and Instruments

Quantitative Methods

The instrument for this study was an adaptation from the County of Riverside, Department of Mental Health, Children's Department Personal Satisfaction Survey (See Appendix A). The survey in its original form was distributed to parents of children seeking mental health services. The term grandparent has been substituted for the term parent used by the County of Riverside. It was thought that since the foremost objective of this time-tested survey is to measure role satisfaction, and since custodial grandparents are assuming the role of parent, data collection would not be skewed by the roles each played.

The agency indicated there were no conflicts of interest or copyright violations between the original form and the one being used for this study.

A pretest was conducted, February 1, 2005 with a population that mirrors the target group in this study. Participation in the test was voluntary, and all those
surveyed were informed of the purpose of the pretest. At completion of the survey, participants were asked to comment on the degree of sensitivity that was implied in the construction of each question. Those questions that elicited unfavorable response were omitted.

Survey answers were based on the Likert scale model, representing an ordinal level of measurement. Respondents to a Likert scale indicated their attitudes by checking how strongly they agreed or disagreed with survey statements that range from very positive to very negative. The scale used ranged from five to one, five representing the strongest reaction and decreasing in range of emotion to one. Surveys containing fourteen questions were distributed to member of the Grandparents Raising Grandchildren support group led by Jane Acton in Idyllwild, California.

Procedures

While in the process of networking at various Grandparents Raising Grandchildren workshops, contact was established with a group that offered an appropriate population for the purpose of project research; a group organized by Jane Acton in Idyllwild, California was identified. The group was easily accessible, the
respondent size was manageable, and the group agreed to participate and was enthusiastic.

This writer attended the group, at which time a brief introduction of the purpose of the project was offered. Those present were given the opportunity to choose either participating in the written survey or interview.

The survey instrument along with a pencil was distributed to all grandparents in the organization. To facilitate clarity the instrument was read to the group. A plain white envelope free of identifying marks was attached to the survey instrument. Participants were asked to place the survey in the envelope and deposit it in a receptacle when they exited the meeting. The participants were asked to follow these instructions even if they elected not complete the survey. Survey completion took place at the organizations meeting site, tables were arranged so that participants were given privacy when completing the survey. This writer remained separate from those completing the survey. A small token of appreciation was available as each envelope was deposited.

Protection of Human Subjects

Paramount to feasibility of this project was the sensitivity quotient. All questions were prepared and
reviewed to assure they not only met ethical standards of research, but also were sensitive to the population being researched.

Each participant was asked to read and sign an informed consent (See Appendix B) prior to starting the personal collection data phase of research; first names were optional and were used only as a follow-up measure. In the debriefing phase, a debriefing statement (See Appendix C), and a list of resources were available to assist with issues that may have surfaced during the data collection process (See Appendix D). All notes were held confidential and great care was taken to avoid using personal identification information. As planned, all data collection instruments will be shredded after completion of the project.

Data Analysis

The reporting feature of the instrument has a rank-order value design to report role satisfaction as a custodial grandparent; therefore, the variables are at the ordinal level of measurement.

A univariate analysis was used to assess the variables frequency and central tendency. The bivariate statistic for analyzing associations among variables was
the Pearson’s r test. A Pearson’s r test statistically determines significance in the analysis of frequency distribution. The significance level was 0.01 and 0.05% for this survey. The Pearson’s r test assisted in determining if there was an association between the results of the survey and low role satisfaction as custodial grandparents.

Constructs likely to emerge in analyses are reflective of one another; the lower the quality of life as perceived by the individual, the greater the likelihood of reported low role satisfaction as grandparents raising grandchildren. Grandparents have a desire to “raise their grandkids right;” when they perceive they are not meeting that expectation for a number of reasons (finances, health or social structure) they have the potential to view their quality of life as below that of their peers. Custodial role satisfaction is dramatically influenced by the internalized perception of where am I, how well am I doing, and how well the grandchildren are doing in my care.

Summary

The purpose of this study was to explore how participants perceived their quality of life as an
individual and how they felt about their quality of life in the role of custodial grandparent. Once those areas were identified and supported by data collected, interventions could then be formulated that would address improved quality of life.
CHAPTER FOUR

RESULTS

Introduction

Included in Chapter Four is a presentation of the results of this study that included overall satisfaction of grandparents raising their grandchildren. The chapter concludes with a summary.

Presentation of the Findings

The researcher attended a grandparent raising grandchildren support group. As a result, 27 14-question client satisfaction questionnaires were completed. Six additional questionnaires were mailed. Out of the 33, all 33 (100%) were completed and returned. Of the 33 respondents, all chose to take a survey rather than respond to the interview question (See Appendix E).

The sample consisted of 2 men and 31 females, whose ages were 55 years and older. The study was inclusive regarding ethnicity. Marital and occupational status was not a factor. The data collection source was respondents who were custodial grandparents that were raising at least one grandchild in their home, under the age of eighteen, in the absence of the biological parents. The length of
time in the caregiving relationship did not restrict research participation.

The majority of respondents that reported they strongly agree with survey questions are indicated in Table 2.

Table 2. Respondents who Strongly Agree

<table>
<thead>
<tr>
<th></th>
<th>Gave up more than expected</th>
<th>Frustrated by my performance</th>
<th>Feel trapped</th>
<th>Can't do things I like to do</th>
<th>Grandchildren don't listen</th>
<th>Spouse problems</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sometimes Agree</td>
<td>18.2</td>
<td>27.3</td>
<td>24.2</td>
<td>27.3</td>
<td>18.2</td>
<td>24.2</td>
</tr>
<tr>
<td>Agree</td>
<td>51.5</td>
<td>33.3</td>
<td>36.4</td>
<td>27.3</td>
<td>36.4</td>
<td>30.3</td>
</tr>
<tr>
<td>Not Sure</td>
<td>12.1</td>
<td>0.0</td>
<td>3.0</td>
<td>0.0</td>
<td>21.2</td>
<td>12.1</td>
</tr>
<tr>
<td>Disagree</td>
<td>15.2</td>
<td>30.3</td>
<td>30.3</td>
<td>30.3</td>
<td>6.1</td>
<td>27.3</td>
</tr>
<tr>
<td>Sometimes Disagree</td>
<td>0.0</td>
<td>9.1</td>
<td>6.1</td>
<td>15.2</td>
<td>18.2</td>
<td>6.1</td>
</tr>
</tbody>
</table>

The findings also indicated the selection of not sure made up a significant portion of respondent’s answers and are reported in Table 3.
Table 3. Respondents who Reported Not Sure

<table>
<thead>
<tr>
<th></th>
<th>Not a very good grandparent</th>
<th>I'm not appreciated</th>
<th>Grandchildren don't listen</th>
<th>Warmer feelings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not Sure</td>
<td>36.4</td>
<td>21.1</td>
<td>21.2</td>
<td>18.2</td>
</tr>
</tbody>
</table>

The following were significant at 0.01** and 0.05* level and represent the highest intercorrelations of responding grandparents raising grandchildren (See Appendix F).

When asked if their grandchild turned out to be more of a problem than they expected, 54.6% reported no. When the grandparents were asked if they expected to have closer and warmer feelings for the grandchild in their care, and did that bother them the grandparents (60.6%) reported no. Feelings about the child being a problem and expectation of close feelings were significant.

The second highest correlation ($r = .851$, $P = .000$) resulted from asking the grandparents was it hard for them to get their grandchild to do as asked, and did caring for their grandchild cause more problems than expected in their relationship with their spouse (or male/female friend). About half of respondents (54.6%) reported that
it was harder than expected getting their grandchild to do as asked. About half (54.5%) reported problems in their relationship, and 12.1% said they were not sure. These two variables were significantly correlated \( (r = .764, \ P = .000) \) [See Appendix F].

The third highest correlation was between finding that getting their grandchild to do something or stopping doing something was somewhat harder than they expected, and whether they feel trapped by their responsibilities as a grandparent \( (r = .744, \ P = .001) \). Of the respondents, 54.6% said it was harder than expected, 24.3% said it was not as hard as expected, and 21.2% were not sure. With regards to the respondents feeling trapped by their responsibilities as a grandparent 60.6% reported yes, 36.4% reported no, and 3.0% reported not sure (See Appendix F).

The one question on the survey that reports what was correlated with the most other items (seven) asked if the grandparents found that getting their grandchild to do something or stop doing something was somewhat harder than they expected. That item was significantly correlated with respondents reporting they often have the feeling that they cannot handle things very well \( (r = .522, \ P = .002) \), and that they find themselves giving up more of their life.
to meet their grandchildren’s needs than they ever expected \( r = .744, \ P = .000 \). Grandparents also reported that there are quite a few things that bother them about their life \( r = .503, \ P = .000 \).

Grandparents reported that caring for their grandchild has caused more problems than they expected in their relationship with their spouse (or male/female friend) \( r = .764, \ P = .000 \), and that they are not as interested in people as they used to be \( r = .385, \ P = .027 \).

Data indicates a correlation between the grandparents perception of their success at motivating their grandchild to follow directions and how good they felt in the custodial grandparenting role \( r = .539, \ P = .001 \). Finding it difficult to get their grandchild to do as asked, (60.6% reported no) was correlated with the question did you expect to have warmer feelings for your grandchild \( r = .422, \ P = .018 \).

The question reporting the next highest numbered correlations (six) with other questions on the survey asked if the grandparent often had feelings that they cannot handle things very well. The item was correlated with feeling they are almost never able to do the things that they like to do (54.6% reported yes) \( r = .631, \ P = .000 \).
P = .000], and with feeling there are quite a few things that bother them about their life (48.5% yes) (r = .399, P = .029). When asked if caring for their grandchild has caused problems with spouse (male/female friend) than they expected 54.5% report yes (r = .560, P = 0.001). When asked if when they do things for their grandchild do they get the feeling that their efforts are not appreciated very much, 45.5% reported yes (r = .431, P = .012). When asked do they find it difficult to get their grandchildren to do as asked, 54.6% report yes, however, 48.5% report their grandchild did not turn out to be more of a problem than they expected (r = .435, P = .011).

Summary

Chapter Four reviewed the results of the project. The findings indicated that most grandparents found it more difficult than anticipated to motivate their grandchildren to do as asked, and that the role of custodial grandparent did adversely affect their relationship with their spouse (male/female friend).
CHAPTER FIVE
DISCUSSION

Introduction

Included in Chapter Five is a presentation of the conclusions gleaned as a result of completing the project. Further, the limitations of the project are presented followed by recommendations and summary.

Discussion

The study evaluated the level of satisfaction custodial grandparents experienced raising their grandchildren. When asked if their grandchild turned out to be more of a problem than they expected, the majority of the grandparents reported no. When asked if they expected to have warmer feelings for their grandchild over half reported no. The findings suggest that while they may not have been fully aware of their role when first assuming the task of custodial grandparent, at the time of the survey they were satisfied with the level of the relationship. It is concluded that custodial grandparents are resigned to their role and are meeting role demands as necessary.

These research data support the 1998 Hayslip and Shore study that reports "surrogate parents eventually
adapt to the situation." The data also support the Szinovaces et al. (1999) study, which reported "Grandparents may adjust to their surrogate parenting responsibilities over time. Initial declines in grandparent’s situations immediately after assuming surrogate parenting are followed by improvement over time as grandparents adapt to their new circumstances" (p. 386).

Over half of the respondents reported it is difficult to get their grandchild to do as asked. The undercurrent implication is one of frustration, of having to negotiate with their grandchildren to do something that they want. These survey results support the 1999 Burnett study that reported "custodial role strain is often exacerbated by life conditions such as role conflicts due to balancing the needs of grandchildren with those of themselves" (p. 5).

In relation to how those feelings and situations affected family relationships, respondents recognized the potential for their role as custodial grandparents causing more problems than expected in other relationships. Respondents reported they often have the feeling that they cannot handle things very well. This is consistent with Kelly (1993) who reports; "many grandparents in the United
States are finding grandparenthood different from what they expected. Emotional difficulties may include feelings of disappointment, self-doubt about their ability to parent effectively; loss of freedom; disruption if relationship with peers and loss of control over one’s future” (p. 1). Ruffin’s kinship care study goes on to say “Grandparents who are raising their grandchildren express significantly lower feelings of life satisfaction when compared to non-caregiving grandparents” (p. 2).

In this study, grandparents report they find themselves giving up more of their life to meet their grandchildren’s needs than they ever expected. The 1999 study by Burnette likewise reported “a commonly mentioned problem is the decline in social contacts and insufficient social supports, noting surrogate parents have little time left for social encounters” (p. 5). Henderson and Stevenson (2003) report, “grandparents find they have little time to themselves. Tight schedules mean less time for other family members and friends” (p. 2).

This study found that grandparents feel that caring for their grandchild has caused more problems with other relationships such as their spouses (or male/female friends) than expected, and that they are not as interested in people as they used to be. These research
findings are supported by Szinovacz, DeViney, and Atkinson who report "the effects of surrogate parenting on grandparents well-being result in a decline in social activities, an increase in relationship stresses with other family members, and a decline in subjective well-being" (p. S376).

Over half of the respondents felt that in their new role as custodial grandparent, they are almost never able to do the things that they like to do. Two studies that support those research findings are a 1998 Hayslip, Shore, Henderson, and Lambert study who report "in many cases, emotional problems are attributed to life changes associated with surrogate parenting" (p. 171). The Szinovacz 1999 study reports "results for the effect on surrogate parenting on life satisfaction confirm that grandchildren’s move into the household reduces grandparent’s well-being" (p. S383).

It is interesting to note the frequency of the survey data category of "not sure" being reported. The substantial recognition of indecision might indicate that grandparents had not given much thought to the degree their new role would play in their life relationships and self-esteem.
Limitations

A number of limitations of the present study should be recognized. First, due to time constraints, the researcher did not mail out follow up postcards after the initial questionnaire was mailed.

Another limitation was the low sample size (n = 33). Further, the researcher was unable to do a comparison between demographics and client satisfaction due to lack of available data.

Recommendations for Social Work Practice, Policy and Research

A recommendation by this researcher is that Riverside County, Office on Aging expand their Grandparents Raising Grandparent program to be inclusive of a One-Stop Resource Center. The current Grandparent Raising Grandparent program is designed to assist relative caregivers in the development, maintenance and strengthening of their families and to address the multiple, complex issues faced by grandparents raising grandchildren through education, program development, and advocacy. It also promotes access to customer friendly support services for individuals and their grandchildren. Research data suggest the grandparent raising grandchildren community is in need of adding a mental health component in the existing program. To
increase role satisfaction, it is recommended a component of the One-Stop Resource Center would be a team of mental health workers who would concentrate on issues, concerns, and problems that custodial grandparents experience.

Conclusion

In summary, the responses from the surveys indicated that the custodial grandparents are satisfied with their roles. There is however, a gap in personal life satisfaction that is noteworthy. When asked if they find themselves giving up more of their life to meet their grandchildren’s needs than they ever expected, 69.7% answered yes, 15.2% said no, and 12.1% answered they were not sure. None of respondents reported they strongly disagreed with the question. Custodial grandparents appear to be resigned to their role and are meeting role demands as necessary. There are sufficient data to suggest there is a need to increase quality of life and custodial role satisfaction.

When asked, if they often have the feeling that they cannot handle things very well the majority said yes. This lack of confidence in the role of custodial grandparent is a good indicator the grandparent is experiencing low role satisfaction.
The correlations between the questions my grandchild turned out to more of a problem than I had expected and the question I expected to have warmer feelings suggests that while the custodial grandparent may not have been fully aware of their role when first assuming the task, they were satisfied with the level of the relationship.

There seems to be a pattern of custodial grandparents reporting “not sure” to a large number of questions. The conclusion could be drawn that the grandparents have assumed their role without thought of how it affects their lives and thus their role satisfaction. It would seem that these people have taken on their assignments out of commitment to the welfare of the child rather than considering their own personal quality of life issues.
APPENDIX A

QUESTIONNAIRE
Role Satisfaction; Grandparents Raising Grandchildren

Please rate each on the following scale
SA = sometimes agree, A = agree, NS = not sure, D = disagree, SD = sometimes disagree

1. I often have the feeling that cannot handle things very well. SA A NS D SD
2. I find myself giving up more of my life to meet my grandchildren’s needs that I ever expected. SA A NS D SD
3. I feel trapped by my responsibilities as a grandparent. SA A NS D SD
4. I feel that I almost never able to do things that I like to do. SA A NS D SD
5. There are quite a few things that bother me about my life. SA A NS D SD
6. Caring for my grandchild has caused more problems that I expected in my relationship with my spouse (or male/female friend). SA A NS D SD
7. I feel alone and without friends. SA A NS D SD
8. I am not interested in people as I used to be. SA A NS D SD
9. When I do things for my grandchild, I get the feeling that my efforts are not appreciated very much. SA A NS D SD

For the next statement, choose your response from the choices “1” to “5” below

10. I feel that I am:
    1. not very good at being a grandparent
    2. a person who has some trouble being a grandparent
    3. an average grandparent
    4. a better than average grandparent
    5. a very good grandparent

11. I expected to have closer and warmer feeling for my grandchild than I do and this bothers me. SA A NS D SD

For the next statement, choose your response from the choices “1” to “5” below

12. I have found that getting my grandchild to do something or stop doing something is:
    1. not very good at being a grandparent
    2. a person who has some trouble being a grandparent
    3. an average grandparent
    4. a better than average grandparent
    5. a very good grandparent

13. My grandchild turned out to be more of a problem than I had expected. SA A NS D SD

14. My grandchild makes more demands on me than most children SA A NS D SD
APPENDIX B

INFORMED CONSENT
Informed Consent

Dear Participant:

My name is Noreen Ayres, I am a Master's of Social Work student at California State University, San Bernardino. I am conducting a study of grandparents raising grandchildren; you are invited to participate in the study. The results of the survey you are asked to take will be used to better understand what you are going through as you raise your grandchildren.

If you decided to participate in this study, you will have the choice to either complete a questionnaire which will take about 5 to 10 minutes to complete, or answer one question asked by myself. The questions on the survey and the interview question address issues such as quality of life, health, and social structure. These questions and your answers to them reflect your role satisfaction as a grandparent. Your participation is strictly voluntary, and is a one-time effort. Survey/Interview participation in no way affects participation in your existing group. You can choose not to answer specific questions that are on the questionnaire.

As a participant in this study, your confidentiality will be protected. Your full name will never be used on any document or notes used in this study. Your name will never be revealed in the final published report, or in any subsequent report based on this study. The Letter of Consent will be kept in a locked file cabinet for three years and then destroyed. All data collected will be kept in a locked file cabinet until the study is completed, and will be destroyed once the study is completed and published.

If you have any questions or concerns regarding any aspect of this study including your rights as a participant, please feel free to contact my faculty advisor, Dr. Rosemary McCaslin at (909) 880-5507. If you agree to participate in the study at this time, please mark and date below.

Thank you very much for your participation.

Mark (example, X)  Date
APPENDIX C

DEBRIEFING STATEMENT
Debriefing Statement

The study you have just completed was designed by myself, Noreen Ayres, to specifically to explore the role satisfaction of grandparents raising grandchildren.

If you have any questions about this study please feel free to contact my faculty Dr. Rosemary McCaslin at (909) 880-5507. If you would like to obtain a copy of the group results of this study, please contact California State University, San Bernardino Pfau Library.

If you would like more information on services available to grandparents raising grandchildren please contact Department of Public Social Services WarmLine
1-800-303-001 Monday-Friday 8:00 A.M. to 5:00 P.M

Or

Grandparents Raising Grandchildren Program
1-800-510-2020

Web Page: www.rcaging.org
APPENDIX D

RESOURCE LIST
AARP Grandparent Information Center
601 E Street NW
Washington, DC 20049
Phone: (202) 434-2296
Fax: (202) 434-6470

Bilingual Family Counseling Services
313 West F Street
Ontario, CA 91762

California Coalition of Grandparents & Relative Caregivers
Phone: (510) 845-7189

Grandparents Rights Organization
100 West Long Lake Road
Suite 250
Bloomfield Hill, MI, 48304
Phone: (248) 646-7177
Fax: (248) 646-9722
APPENDIX E

INTERVIEW QUESTION
Interview Question

Suppose tonight while you were sleeping a miracle occurs, and life is the way you want it to be. But because the miracle happened while you were sleeping, you did not know it happened. What would be the sign to you that this miracle had occurred.
APPENDIX F

QUESTIONS THAT SHOW SIGNIFICANCE
<table>
<thead>
<tr>
<th></th>
<th>Never able to do</th>
<th>My life bothers me</th>
<th>Problems with spouse</th>
<th>I am not appreciated</th>
<th>Motivate G.child</th>
<th>G.child more of a problem</th>
<th>Demand/ing G.child</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can’t handle things very well</td>
<td>n = 33, P = .000</td>
<td>n = 30, P = .029</td>
<td>n = 33, P = .012</td>
<td>n = 33, P = .002</td>
<td>n = 33, P = .011</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>.631**</td>
<td>.399*</td>
<td>.560**</td>
<td>.431*</td>
<td>.522**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Feel trapped by responsibility</td>
<td>n = 33, P = .001</td>
<td>n = 30, P = .002</td>
<td>n = 33, P = .000</td>
<td>n = 33, P = .000</td>
<td>n = 31, P = .007</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>.561**</td>
<td>.540**</td>
<td>.700**</td>
<td>.744**</td>
<td>.473**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>My life bothers me</td>
<td>n = 30, P = .000</td>
<td>n = 33, P = .041</td>
<td>n = 33, P = .005</td>
<td></td>
<td></td>
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<td></td>
<td>.656**</td>
<td>.376*</td>
<td>.503**</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Problems with spouse</td>
<td>n = 33, P = .036</td>
<td>n = 33, P = .000</td>
<td></td>
<td>n = 31, P = .045</td>
<td></td>
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<tr>
<td></td>
<td>.366**</td>
<td>.764**</td>
<td>.362**</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel alone &amp;</td>
<td>n = 33, P = .018</td>
<td></td>
<td>n = 33, P = .019</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td>.409*</td>
<td></td>
<td>.407*</td>
<td></td>
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<tr>
<td>No interest in people any more</td>
<td>n = 33, P = .019</td>
<td></td>
<td>n = 33, P = .027</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>.407*</td>
<td></td>
<td>.385*</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How good I am as a grandparent</td>
<td>n = 33, P = .001</td>
<td></td>
<td>n = 33, P = .019</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>.539**</td>
<td></td>
<td>.407*</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Should have warmer feelings</td>
<td>n = 31, P = .018</td>
<td></td>
<td>n = 31, P = .000</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>.422*</td>
<td></td>
<td>.851**</td>
<td></td>
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<td></td>
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<tr>
<td>Motivating G.child</td>
<td>n = 31, P = .015</td>
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<td>n = 31, P = .000</td>
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<td></td>
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</tr>
<tr>
<td></td>
<td>.434*</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**Correlation is significant at the 0.01 level (2-tailed)**

*Correlation is significant at the 0.05 level (2-tailed)
REFERENCE


